

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

United Surgical Partners International, Inc. Political Action Committee

ADDRESS (number and street)

15305 Dallas Parkway, Suite 1600

☐Check if different  
than previously  
reported. (ACC)

Addison

TX

75001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00402073

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

11

07

2006

in the  
State of

TX

(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the  
State of☐

5. Covering Period

10

01

2006

through

10

18

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

John Wellik

Signature of Treasurer

Electronically Filed by John Wellik

Date

10

26

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

United Surgical Partners International, Inc. Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		70733.04
(b) Cash on Hand at Beginning of Reporting Period .....	39458.87	
(c) Total Receipts (from Line 19) .....	3600.00	8063.71
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	43058.87	78796.75
7. Total Disbursements (from Line 31) .....	1000.00	36737.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	42058.87	42058.87
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

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Page 3

Write or Type Committee Name

United Surgical Partners International, Inc. Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3450.00	7287.34
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	150.00	776.37
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	3600.00	8063.71
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	3600.00	8063.71
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	3600.00	8063.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3600.00	8063.71

**DETAILED SUMMARY PAGE**

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	487.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	487.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	25250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	11000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1000.00	36737.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1000.00	36737.88

**DETAILED SUMMARY PAGE**

of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	3600.00	8063.71
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3600.00	8063.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	487.88
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	487.88

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 8

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Terry Barron Mailing Address 1920 Autobahn Drive City State Zip Code Germantown TN 38139 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer OrthoLink Occupation VP, Sales and Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 61026.C158 Amount of Each Receipt this Period 500.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Dallas Freyer Mailing Address 917 St. Timothy Street City State Zip Code Corpus Christi TX 78418 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer United Surgical Occupation Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 61026.C160 Amount of Each Receipt this Period 250.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) James Jackson Mailing Address 1557 Poppy Peak Dr City State Zip Code Pasadena CA 91105-2707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer United Surgical Occupation Sr. VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 61026.C156 Amount of Each Receipt this Period 1500.00 Receipt
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		2250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 8

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Tony Martin Mailing Address 1118 Stratford Drive City State Zip Code Richardson TX 75080 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer United Surgical Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>500.00</div>		Date of Receipt <div>10 / 18 / 2006</div> <b>Transaction ID:</b> 61026.C157 Amount of Each Receipt this Period <div>500.00</div> Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Kelly Moore Mailing Address 1305 Wildflower Lane City State Zip Code Flower Mound TX 75028 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer United Surgical Occupation Dir., Acctng and Fac. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>500.00</div>		Date of Receipt <div>10 / 18 / 2006</div> <b>Transaction ID:</b> 61026.C161 Amount of Each Receipt this Period <div>500.00</div> Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Eric Wold Mailing Address 5710 Crescent Park E Apt. 444 City State Zip Code Los Angeles CA 90094 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer United Surgical Occupation Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>200.00</div>		Date of Receipt <div>10 / 18 / 2006</div> <b>Transaction ID:</b> 61026.C162 Amount of Each Receipt this Period <div>200.00</div> Receipt
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<div>1200.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<div>3450.00</div>

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Bob Corker for Senate

Mailing Address 518 Georgia Ave.  
2nd Floor

City State Zip Code  
Chattanooga TN 37403-

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61026.E81

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

POLITICAL CONTRIBUTION

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

1000.00